ATTACHMENT A (Sponsors of Open Sites only)

PUBLIC RELEASE SUMMER FOOD SERVICE PROGRAM

The <u>(school/center)</u> announces the sponsorship of the Summer Food Service Program. <u>(Meals and/or snacks)</u> will be served to all children at no charge.

Site Name	Address	Days of Week Meal Service Offered	Dates of Operation	Offered Meals	Times Served
		<u> </u>			
		<u> </u>			
		<u> </u>			
		<u> </u>			
		<u> </u>			
		<u> </u>			
For more information, contact	ot .	at			
If other than a "meals only" s					
·					
In accordance with Federal I	aw and U.S. Departr	ment of Aariculture pol	icv. this institution i	s prohibited from	,
discriminating on the basis o				-	
To file a complaint of discrim S.W., Washington, D.C. 202 equal opportunity provider a	250-9410, or call (80				
\$	Sent to:				
]	Date sent:				
	Keep a	copy on file at the loca	al agency.		

ATTACHMENT B

PUBLIC RELEASE SUMMER FOOD SERVICE PROGRAM (For Sponsors of Enrolled/Camp Sites with no separate charge for meals)

The <u>(school/center)</u> announces the sponsorship of the Summer Food Service Program. <u>(Meals and/or snacks)</u> will be served to all enrolled children at no additional charge.

served to all enrolled children at no ad	ditional charge.		
Site Name	Address	Person to Contact	Phone Number
		-	
This (camp/site) is applying to receive at a minimum. Families with children patermine the number of meals eligible confidential. The following income guinouseholds receiving food stamps, TA penefits):	participating in this program e for US Department of Agri delines will be used to mak	will be asked to complete P culture reimbursement. All is that determination (children)	arent Income Statements to information will remain n who are members of
	SFSP INCOME ELIGIBILI (Effective Summe		
	HOUSEHOLD SIZE	YEARLY	
	1* 2 3 4 5 6 7 8	\$ 17,705 23,736 29,767 35,798 41,829 47,860 53,891 59,922	
Each additional family member add \$ *A family of one is a child living alone			
n accordance with Federal law and U. discriminating on the basis of race, col			ohibited from
To file a complaint of discrimination, w S.W., Washington, D.C. 20250-9410, equal opportunity provider and employ	or call (800) 795-3272 (void		
Sent to:			
Date sent:	_		
	Keep a copy on file at the	e local agency.	